How to Prepare for Your Life Insurance Interview and Medical Exam

Courtesy of BENCHMARK INSURANCE GROUP

Step One: Interview Prep

You will be asked questions about your insurance and family history. You may also be asked additional questions based on your situation and the type of coverage you are applying for. Below is a list of suggested information to have prepared ahead of time.

Insurance History

- Will this insurance replace any existing insurance or annuity?
- What are the existing insurance policy number(s)?
- Are you also applying for or reinstating life insurance with any other company?
- Have you had life or health insurance declined, postponed, rated, or issued with an increased premium?
- Will you be making payments from out-of-pocket funds? (We understand that you will not be using values from another existing life insurance policy or annuity contract to help pay the initial or future premiums on this new policy.)

Family History

- Have any immediate family members (parent or sibling) been diagnosed with or died from coronary artery disease, cerebrovascular disease, diabetes, or cancer before age 70?
- What are your mother and father's current age or age at death?

Non-Medical

- In the past five years, have you flown as a pilot, student pilot, or crew member, or do you intend to become a pilot?
- In the past five years, have you participated in any activities such as motorized vehicle racing, scuba diving, mountain climbing, skydiving, or extreme sports such as base jumping, bungee jumping, or cave exploration? If not, do you intend to?
- · In the past five years, have you:
 - 1. Had your driver's license denied, suspended, or revoked?
 - 2. Been convicted of or pleaded guilty to driving under the influence of alcohol and/or drugs?
 - 3. Been convicted of or pleaded guilty to any moving violations?
- Within the past 10 years, have you been arrested, convicted, or imprisoned for any crime and/or are you currently awaiting trial for any crime?
- Do you plan to live or travel outside the United States within the next 12 months?
- Information (including date of last use and frequency) about any current or prior use of tobacco or other nicotine products. This includes clove cigarettes, ecigarettes, or vaping products containing nicotine, etc.

Other

Depending on your situation and the type of coverage for which you are applying, you may be asked additional questions about your:

- · Children
- Net worth
- Family insurance
- Employment
- Income
- history

Personal Physician Information

Have the following information on hand:

- Physician Name
- Phone
- Clinic Name
- Date of Last Visit
- Full Address
- · Reason for Last Visit

Be prepared to provide details about your medical history during the interview.

Medical Information

Has a member of the medical profession ever treated you for or diagnosed you with:

- High blood pressure, chest pain, heart attack, coronary artery disease, heart valve disorder, heart murmur, irregular heartbeat, cerebrovascular disease, stroke, circulatory disease, aneurysm, or any disease of the heart or blood vessels?
- Anemia or other abnormality of the blood (other than HIV)?
- A polyp, cyst, tumor, cancer, leukemia, melanoma, lymphoma, or Hodgkin's disease?
- Diabetes, high blood sugar, glucose intolerance, or other endocrine disorder?
- Anxiety, depression, or any other mental or psychiatric illness?
- Asthma, emphysema, cystic fibrosis, sleep apnea, sarcoidosis, tuberculosis, or any other disorder of the lungs or respiratory system?
- A seizure, epilepsy, multiple sclerosis, Parkinson's disease, muscular dystrophy, cerebral palsy, paralysis, Alzheimer's disease, or any other disorder of the brain or nervous system?
- An ulcer, hepatitis, cirrhosis, pancreatitis, ulcerative colitis, Crohn's disease, or any other disorder of the esophagus, liver, stomach, or intestines?
- Arthritis, gout, back trouble, or any disease or disorder of the joints, muscles, or bones?
- Lupus, rheumatoid arthritis, chronic fatigue syndrome, fibromyalgia, or any other disease or disorder of the autoimmune system?
- Nephritis, polycystic kidney disease, or any other disorder of the bladder, kidney, urinary tract, or prostate?

 An infection caused by the Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS), AIDS-Related Complex (ARC), or any other sexually transmitted disease?

Have you ever used:

- Cocaine, crack, marijuana, heroin, ecstasy, PCP, LSD, methamphetamine, or any other hallucinogenic drug or controlled substance?
- Amphetamines, barbiturates, sedatives, opiates, methadone, or controlled substance except as prescribed by a physician?

Have you had or been advised to have treatment or counseling for alcohol or drug use or been asked to reduce or eliminate their usage?

Other than what has already been disclosed, within the past five years, have you:

- Requested or received disability or compensation benefits?
- Been a patient in a hospital or other medical facility, other than for normal childbirth?
- Had any other disease, disorder, or condition?
- Been advised to have surgery, medical tests, or diagnostic procedures (other than for HIV)?

Are you currently receiving medical treatment or taking any other medication or herbal supplement that has not already been disclosed?

If you have applied for any additional riders, additional medical questions may also be asked.



Step Two: Medical Exam Prep

If a medical exam is needed, you will be contacted you to arrange a date and time. The exam will generally take between 20 and minutes. Your exam may include the following:

- · Height and weight measurements
- Blood pressure reading
- · Collection of blood and urine samples
- Electrocardiogram
- Senior assessment at ages 71 and older
- Other tests or procedures



Tips For Your Medical Exam

To get the best results, here are some suggestions:

- Be as relaxed and well-rested as possible.
- Take any medications you normally take.
- Do not drink alcohol at least eight hours before your exam.
- Do not smoke or chew tobacco for at least one hour prior to your exam.
- Avoid caffeine (including coffee, tea, and caffeinated soft drinks) for at least one hour prior to your exam.
- Limit salt intake and high-cholesterol foods 24 hours before your exam.
- Do not engage in strenuous exercise
 24 hours before your exam.
- Drink a glass of water approximately one hour before your exam.
- If fasting is required for your blood test, be sure to follow the directions given to you.



Use this chart to document information for the interview or exam.

Please provide additional information, including diagnosis, date of onset and recovery, medication/treatment prescribed, and the name, address, and telephone number of all attending physicians and hospitals.

Medical Condition	Date of Onset	Date of Recovery	Medication/ Treatment Prescribed	Physician/Hospital Name(s) Address and Phone Number (If other than your personal physician)

